16,-24-06

CC/IA) ARY

AMEN	DMENT 7	ΓRANSMI	TTAL LE	TTER	Docket No. 10122/005003
Application No. 10/804,836-Conf. #7548			Filing Date March 19, 2004		r Art Un ner 3611
<u> </u>		· · · · · · · · · · · · · · · · · · ·	9, 2004	T. H. Winr	iei j 3011
Applicant(s): Tosh		et ai. —————			
Invention: MOTOF	R-OPERATED	POWER STE	ERING APPA	RATUS	
Transmitted herev		THE COMMI			
The fee has been					
		CLAIM	S AS AMENI	DED	
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	7	- 20 =		x	
Independent Claims	2	- 3 =		×	
Multiple Depend	ent Claims (ch	eck if applicab	le)		
Other fee (please		Extension for res		rst month	120.00
x Large Entity				Small Entit	ty
No additiona	I fee is require	d for this ame	ndment.		
	ge Deposit According to the period of the period of this she			n the amount of \$	
A check in th	e amount of \$		to cover	the filing fee is en	closed.
x Payment by	credit card. Fo	orm PTO-2038	is attached.		
				Deposit Account	No. 50-0591
	below. A dup		uns sneet is e	enciosea.	
<u> </u>	ny overpaymer		on processine	fees required under	r 37 CFR 1.16 and 1.17
x onarge a	iny auditional III	ing or application	on processing i	ices required unde	1 57 OF IN 1.10 and 1.17
$-\left(\cdot \right)$	2			Dated:	October 23, 2006
Jonathan P. Øs Attorney/Agent		986			
OSHA · LIANG 1221 McKinney		0			
Houston, Texas (713) 228-8600	77010				

618								
OCT 23 2006 St				U.S. Paten	t and Tradema	ed for use through (irk Office; U.S. DEF	01/31/2007. (OF COMMERC
Under the Pare Work Red	duction Act of 1995	, no person are requ	ired to resp	ond to a collection				control number
Effect Effect	tive on 12/08/2004.			Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				pplication Nur		10/804,836-Conf. #7548		
FEE TRANSMITTAL				iling Date		March 19, 2004 Toshihiro Fukuda		
For FY 2005				irst Named Inv	TOTAL T	T. H. Winner		
Applicant claims small entity status. See 37 CFR 1.27				xaminer Name		3611		
	TOTAL AMOUNT OF PAYMENT (\$) 120.00			ttomey Docket		10122/005003		
METHOD OF PAYME	NT (check all t	hat annly)						
Check X Credit Deposit Account De	Card M	1oney Order	None posit Accoun		(please identi	fy): Osha · Liang L	.LP	
For the above-ide	entified deposit a	account, the Dire	ector is he	ereby authoriz	ed to: (chec	k all that apply)		
_	(s) indicated bel					icated below, ex	cept for th	ne filina fee
	•		ant of	=				
	er 37 CFR 1.16	s) or underpayma and 1.17	ent or	Credit	any overpa	yments		
FEE CALCULATION								
1. BASIC FILING, SEAR	CH, AND EXAM	MINATION FEES	;					
		G FEES	SEAR	CH FEES	EXAMIN	ATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees F	Paid (\$)
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES		100	·	v	Ū	Ü		Small Entity
Fee Description	,						Fee (\$)	Fee (\$)
Each claim over 20 (inclu	uding Reissues)	1					50	25
Each independent claim							200	100
Multiple dependent claim	•	,					360	180
		ee (\$)	Fee Pai	d (\$)	Mu	Itiple Depende	nt Claims	
7 -20=	x	=			Fee	(\$) <u>F</u>	ee Paid (\$	<u>)</u>
HP = highest number of total of	claims paid for, if gr	eater than 20.						_
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)								
3 =	× _	<u> </u>						
HP = highest number of indep	endent claims paid	for, if greater than 3	3.					_
3. APPLICATION SIZE F If the specification and listings under 37 CFI sheets or fraction the	drawings excee R 1.52(e)), the	application size	fee due i	s \$250 (\$125	for small en	ed sequence or tity) for each ac	computer Iditional 50)
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
100 = /50 (round up to a whole number) x =								
4. OTHER FEE(S)							Fees	Paid (\$)
Non-English Specifica								
Other (e.g., late filing surcharge): 1251 Extension for response within first month 120.00						0.00		

SUBMITTED BY					
Signature	-M	Registration No. (Attorney/Agent)	33,986	Telephone	(713) 228-8600
Name (Print/Type)	Jonathan P. Osha			Date	October 23, 2006



Application No. (if known): 10/804,836

Attorney Docket No.: 10122/005003

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EV 804211642 US in an envelope addressed to:

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

October 23, 2006 Date

Qua R	Bleaun.				
Signature					
Ava R. Brown					
Typed or printed name of person signing Certificate					
	(713) 228-8600				
Registration Number, if applicable	Telephone Number				

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Amendment Transmittal (1 page)

Fee Transmittal (1 page)

One Month Request for Extension of Time Under 37 CFR 1.136(a)

(1 page)

Amendment (8 pages)

Payment by credit card. Form PTO-2038 is attached (1 page)

Charge \$120.00 to credit card